PHA 5-Year and	U.S. Department of Housing and Urban	OMB No. 2577-0226
Ammuel Dlem	Development	Expires 4/30/2011
Annual Plan	Office of Public and Indian Housing	

1.0	PHA Information PHA Name: St. Martinville Ho	PHA Code:	LA040						
	PHA Type: Small			Standard	HCV (Section 8)				
	PHA Fiscal Year Beginning: (MN	3/31/2009	<u> </u>						
2.0	Inventory (based on ACC units at time of F Number of PH units: 124	Y beginning	in 1.0 above)	Number of HCV units:		_			
3.0	Submission Type  S-Year and Annual Plan	Annual	Plan Only	5-Year Plan Only					
4.0	PHA Consortia  ☐ PHA Consortia: (Check box if submitting)	ng a ioint Plar	and complete table below.)						
	Participating PHAs	PHA Program(s) Included in the Code Consortia		Programs Not in the Consortia	No. of Units in Each Program PH HCV				
	PHA 1:								
	PHA 2: PHA 3:								
5.0	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 or	nly at 5-Year	Plan update.						
5.1	Mission. State the PHA's Mission for servi jurisdiction for the next five years: To promote adequate and affordable housin		-			HA's			
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.  To continue to improve Public Housing Management, increase customer satisfaction & modernize public housing units as often as possible.								
6.0	PHA Plan Update								
	<ul> <li>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: N/A</li> <li>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. Main PHA Administrative Office</li> </ul>								
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable.								
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.								
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFFP financing.								
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund Program Five-Year Action Plan, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.								
8.3	Capital Fund Financing Program (CFFP).  Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.								
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.								
9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.								

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Additional Information. Describe the following, as well as any additional information HUD has requested.

- (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan
  - The St. Martinville Housing Authority continues to work on the goals described in the 2005 PHA Plan by updating and rehabbing units and keeping the units, safe and sanitary.
- (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
  - a. Substantial Deviation from the 5-Year Plan
    - ✓ Any change to Mission Statement such as:
    - ✓ 50% deletion from or addition to the goals and objectives as a whole.
    - ✓ 50% or more decrease in the quantifiable measurement of any individual goal or objective
  - b. Significant Amendment or Modification to the Annual Plan
    - ✓ 50% variance in the funds projected in the Capital Fund Program Annual Statement
    - ✓ Any increase or decrease over 50% in the funds projected in the Financial Resource Statement and/or the Capital Fund Program Annual Statement
    - ✓ Any change in a policy or procedure that requires a regulatory 30-day posting
    - ✓ Any submission to HUD that requires a separate notification to residents, such as HOPE VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership Programs
    - ✓ Any change inconsistent with the local, approved Consolidated Plan
- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
  - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
  - (g) Challenged Elements

10.0

- (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
- (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

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6.0 PHA PLAN UPDATE  a) The following plan elements have been revised since the last PHA plan submission:
b) Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)  Main administrative office of the PHA PHA development management offices PHA local offices
Display Locations For PHA Plans and Supporting Documents
The PHA Plans (including attachments) are available for public inspection at: (select all that apply)  Main administrative office of the PHA PHA development management offices PHA local offices Main administrative office of the local government Main administrative office of the County government Main administrative office of the State government Public library PHA website Other (list below)
PHA Plan Supporting Documents are available for inspection at: (select all that apply)  Main business office of the PHA  PHA development management offices  Other (list below)
6B-1. PHA Policies Governing Eligibility, Selection, and Admissions  [24 CFR Part 903.7 9 (c)]  A. Public Housing  Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.  (1) Eligibility
a. When does the PHA verify eligibility for admission to public housing? (select all that apply)  When families are within a certain number of being offered a unit: (Next)  When families are within a certain time of being offered a unit: (state time)  Other: (describe).
b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?  Criminal or Drug-related activity  Rental history Housekeeping Other (describe)
c. 🛛 Yes 🗌 No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
d. 🖂 Yes 🗌 No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
e.   Yes   No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
(2)Waiting List Organization
a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)  Community-wide list  Sub-jurisdictional lists  Site-based waiting lists  Other (describe)

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	PHA main adminis	ed persons apply for admission to public housing? strative office site management office
	c. If the PHA plans to skip to subsection (3) A	operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, Assignment
	1. How many site-base	d waiting lists will the PHA operate in the coming year?
		Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? If yes, how many lists?
	3.  Yes No: 1	May families be on more than one list simultaneously? If yes, how many lists?
	☐ PHA main adminis ☐ All PHA developn ☐ Management office	I persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)? strative office nent management offices es at developments with site-based waiting lists at to which they would like to apply
(3)	a. How many vacant unlist? (select one)  One Two Three or More	nit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting
	b. 🛛 Yes 🗌 No: Is the	his policy consistent across all waiting list types?
	c. If answer to b is no,	list variations for any other than the primary public housing waiting list/s for the PHA:
<b>(4</b> )	) Admissions Prefer	rences
()	a. Income targeting:  ☐ Yes ☑ No:	Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
	<ul> <li>✓ Emergencies</li> <li>✓ Over-housed</li> <li>✓ Under-housed</li> <li>✓ Medical justification</li> <li>✓ Administrative rea</li> </ul>	will transfers take precedence over new admissions? (list below)  on  sons determined by the PHA (e.g., to permit modernization work) state circumstances below)
		Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)
		ing admission preferences does the PHA plan to employ in the coming year? (select all that apply from either aces or other preferences)
	☐ Victims of domest ☐ Substandard housi ☐ Homelessness	cement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) ic violence
	☐ Veterans and veter	and those unable to work because of age or disability

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	Those enrolled currently in educational, training, or upward mobility programs  Households that contribute to meeting income goals (broad range of incomes)  Households that contribute to meeting income requirements (targeting)  Those previously enrolled in educational, training, or upward mobility programs  Victims of reprisals or hate crimes  Other preference(s) (list below)
	3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.
	□ Date and Time
	Former Federal preferences:  Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  Victims of domestic violence  Substandard housing  Homelessness  High rent burden
	Other preferences (select all that apply)  Working families and those unable to work because of age or disability  Veterans and veterans' families  Residents who live and/or work in the jurisdiction  Those enrolled currently in educational, training, or upward mobility programs  Households that contribute to meeting income goals (broad range of incomes)  Households that contribute to meeting income requirements (targeting)  Those previously enrolled in educational, training, or upward mobility programs  Victims of reprisals or hate crimes  Other preference(s) (list below)
	<ul> <li>4. Relationship of preferences to income targeting requirements:</li> <li>The PHA applies preferences within income tiers</li> <li>Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements</li> </ul>
	Occupancy  a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)  The PHA-resident lease The PHA's Admissions and (Continued) Occupancy policy PHA briefing seminars or written materials Other source (list)
	<ul> <li>b. How often must residents notify the PHA of changes in family composition? (select all that apply)</li> <li>At an annual reexamination and lease renewal</li> <li>Any time family composition changes</li> <li>At family request for revision</li> <li>Other (list)</li> </ul>
<b>(6)</b> ]	Deconcentration and Income Mixing
	a.  Yes No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?  Did the PHA adopt any changes to its admissions policies based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?
	c. If the answer to b was yes, what changes were adopted? (select all that apply)  Adoption of site-based waiting lists. If selected, list targeted developments below:
	Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments . If selected, list targeted developments below:
	Employing new admission preferences at targeted developments. If selected, list targeted developments below:

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	Other (list policies and developments targeted below)
	Yes No: Did the PHA adopt any changes to other policies based on the results of the required analysis of the need for oncentration of poverty and income mixing?
	f the answer to d was yes, how would you describe these changes? (select all that apply)  Additional affirmative marketing  Actions to improve the marketability of certain developments  Adoption or adjustment of ceiling rents for certain developments  Adoption of rent incentives to encourage deconcentration of poverty and income-mixing  Other (list below)
	assed on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)  Not applicable: results of analysis did not indicate a need for such efforts  List (any applicable) developments below:
_	Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)  Not applicable: results of analysis did not indicate a need for such efforts  List (any applicable) developments below:

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#### **6B - 2. STATEMENT OF FINANCIAL RESOURCES**

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other

501 11	ces or other Financial Resource	es:						
Planned Sources and Uses								
Sou	irces	Planned \$	Planned Uses					
1. ]	Federal Grants (FY 2010 grants)							
a)	Public Housing Operating Fund	<i>\$269,134.00</i>						
b)	Public Housing Capital Fund	\$165,052.00						
c)	HOPE VI Revitalization							
d)	HOPE VI Demolition							
e)	Annual Contributions for Section 8 Tenant-Based Assistance							
f)	Public Housing Drug Elimination Program (including any Technical Assistance funds)							
g)	Resident Opportunity and Self-Sufficiency Grants							
h)	Community Development Block Grant							
i)	HOME							
Oth	er Federal Grants (list below)							
2. l	- · · /	0100 471 00						
	2007 Capital Fund Program	\$169,471.00						
	2008 Capital Fund Program	\$178,870.00						
	2009 Capital Fund Program 2009 ARRA Stimulus	\$165,052.00						
2 1	Public Housing Dwelling Rental Income	\$226,414.00						
J. 1	Tubic Housing Dweining Kentai Income							
4. (	Other income (list below)							
<b>5.</b> ]	Non-federal sources (list below)							
	Total resources	\$1,173,993.00						

#### **6B - 3. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

#### A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

#### (1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a.	Use of discretionary policies: (select one)
	The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-
	based rents are set at the highest of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare
	rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))
	or
$\boxtimes$	The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

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b. Minimum Rent  1. What amount best reflects the PHA's minimum rent? (select one)  \$0  \$1-\$25
∑ \$26-\$50
2.   Yes   No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?
3. If yes to question 2, list these policies below:
Rents set at less than 30% than adjusted income  1.   Yes   No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:
<ul> <li>d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)</li> <li>For the earned income of a previously unemployed household member</li> <li>For increases in earned income</li> <li>Fixed amount (other than general rent-setting policy) If yes, state amount/s and circumstances:</li> </ul>
Fixed percentage (other than general rent-setting policy) If yes, state percentage/s and circumstances:  For household heads For other family members
<ul> <li>For transportation expenses</li> <li>For the non-reimbursed medical expenses of non-disabled or non-elderly families</li> <li>✓ Other (describe below)</li> </ul>
<ul> <li>e. Ceiling rents</li> <li>1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)</li> <li>Yes for all developments</li> <li>Yes but only for some developments</li> <li>No</li> </ul>
<ul> <li>2. For which kinds of developments are ceiling rents in place? (select all that apply)</li> <li>For all developments</li> <li>For all general occupancy developments (not elderly or disabled or elderly only)</li> <li>For specified general occupancy developments</li> <li>For certain parts of developments; e.g., the high-rise portion</li> <li>For certain size units; e.g., larger bedroom sizes</li> <li>Other (list below)</li> </ul>
<ul> <li>3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)</li> <li>Market comparability study</li> <li>Fair market rents (FMR)</li> <li>95th percentile rents</li> <li>75 percent of operating costs</li> <li>100 percent of operating costs for general occupancy (family) developments</li> <li>Operating costs plus debt service</li> <li>The "rental value" of the unit</li> <li>Other (list below)</li> </ul>
<ul> <li>f. Rent re-determinations:</li> <li>1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)</li> <li>Never</li> <li>At family option</li> <li>Any time the family experiences an income increase</li> </ul>
Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)  Other (list below)
g. Tes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

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#### (2) Flat Rents

In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)
☐ The section 8 rent reasonableness study of comparable housing
Survey of rents listed in local newspaper
Survey of similar unassisted units in the neighborhood
Other (list/describe below)

#### 6B- 4. Operations and Management

[24 CFR Part 903.7 9 (e)]

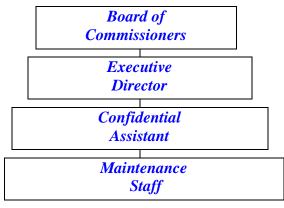
Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

#### A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached.
- A brief description of the management structure and organization of the PHA follows:



#### **B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected		
		Turnover		
Public Housing	106	50		
Section 8 Vouchers	N/A	N/A		
Section 8 Certificates	N/A	N/A		
Section 8 Mod Rehab	N/A	N/A		
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	N/A		
Public Housing Drug Elimination Program (PHDEP)	N/A	N/A		
	N/A	N/A		
	N/A	N/A		
Other Federal Programs(list individually)	N/A	N/A		

#### C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

- (1) Public Housing Maintenance and Management: (list below)

  Admissions and Continued Occupancy Policy / Maintenance Policy / Management Policy
- (2) Section 8 Management: (list below) N/A

#### <u>6B – 5. PHA Grievance Procedures</u>

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

Α.		lic			

1. ☐ Yes ⊠ No:	Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Par
	966, Subpart B, for residents of public housing? If yes, list additions to federal requirements below:

2.	Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
X	PHA main administrative office
	PHA development management offices
	Other (list below)

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Eld	erly Families and Families with Disabilities	<u>UI</u>
[24 (	R Part 903.7 9 (i)]	
Exer 1.	Yes No:  Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any p housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families families or only families and families with disabilities as provided by section 7 of the U.S. Housing A	and with
	1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; Pl completing streamlined submissions may skip to component 10.)	
	2. Activity Description  Yes No: Has the PHA provided all required activity description information for this component in the <b>optional</b> Housing Asset Management Table? If "yes", skip to component 10. If "No", complete the Activity Description table below.	Public
	Designation of Public Housing Activity Description	
	1a. Development name:	
	1b. Development (project) number:	
	2. Designation type: Occupancy by only the elderly	
	Occupancy by families with disabilities	
	Occupancy by only elderly families and families with disabilities	
	3. Application status (select one) Approved; included in the PHA's Designation Plan	
	Submitted, pending approval	
	Planned application	
	<ul><li>4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)</li><li>5. If approved, will this designation constitute a (select one)</li></ul>	
	New Designation Plan	
	Revision of a previously-approved Designation Plan?	
	6. Number of units affected:	
	7. Coverage of action (select one)  Part of the development	
	Total development	
6R	-7. PHA Community Service and Self-sufficiency Programs	
[24 C Exer	PR Part 903.7 9 (1)] stions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete the component C.	ete sub-
Α.	PHA Coordination with the Welfare (TANF) Agency	
	. Cooperative agreements:	
	Yes No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share inform	
	and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1 If yes, what was the date that agreement was signed? <u>DD/MM/YY</u>	937)?
	2. Other coordination efforts between the PHA and TANF agency (select all that apply)  Client referrals	
	Information sharing regarding mutual clients (for rent determinations and otherwise)  Coordinate the provision of specific social and self-sufficiency services and programs to eligible families  Jointly administer programs	
	Partner to administer a HUD Welfare-to-Work voucher program	
	Joint administration of other demonstration program	
	Other (describe)	
В.	Services and programs offered to residents and participants (1) General	
	<ul> <li>Self-Sufficiency Policies</li> <li>Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency</li> </ul>	v of
	ssisted families in the following areas? (select all that apply)	,
	Public housing rent determination policies	
	Public housing admissions policies  Section 8 admissions policies	
	Preference in admission to section 8 for certain public housing families	

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	Preferences for families working coordinated by the PHA Preference/eligibility for public Preference/eligibility for section Other policies (list below)	housing homeow	nership option participation		or non-housing program	ms operated or
		coordinate, promresidents? (If "ye	note or provide any programs", complete the following the ition of the table may be alt	table	; if "no" skip to sub-co	and social self- omponent 2, Family Self
		S	ervices and Programs	S		
	Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Ac (de PH	excess evelopment office / IA main office / ner provider name)	Eligibility (public housing or section 8 participants or both)
•						
<b>(2)</b>	Family Self Sufficiency prog	ram/s				
	a. Participation Description					
		Family Se	elf Sufficiency (FSS) P	Part	icipation	
	Program	Red	quired Number of Participar	nts	Actual Nun	nber of
			(start of FY 2004 Estimate)		Participants	
					(As of: DD/	/MM/YY)
	Public Housing					
	Section 8					
	Plan address t		ne minimum program size roplans to take to achieve at least below:			
C.	1. The PHA is complying with the treatment of income changes res  Adopting appropri those policies  Informing resident  Actively notifying Establishing or pur information and complete.	sulting from welfa ate changes to the as of new policy or residents of new resuing a cooperation coordination of servaccool for exchange	re program requirements) be PHA's public housing rent admission and reexaminat policy at times in addition to the agreement with all approximately.	y: (s t dete tion to ada opriat	elect all that apply) ermination policies and mission and reexamina te TANF agencies regi	d train staff to carry out
D. I	Reserved for Community Ser	vice Requiren	nent pursuant to secti	on 1	<b>12(c)</b> of the U. S. J	Housing Act of 1937
	der to be eligible for continued occupe					

#### D

month (not including political activities) within the community in which the public housing development is located or (2) participate in an economic self-sufficiency program unless they are exempt from this requirement. The following adult members are exempt from this requirement: Family members who are 62 or older, family members who are blind or disabled, family members who are primary caregiver for someone who is blind or disabled, family members engaged in work activity, family members who are exempt from work activity under Part A Title IV of the Social Security Act or under any other state welfare program, including the welfare to work program, family members receiving assistance under a state program funded under Part A Title IV of the Social Security Act or under any other state welfare program, including welfare to work and who are in compliance with that program

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#### 6B - 8. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

<b>A.</b>	Need for measures to ensure the safety of public housing residents  1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)  ☐ High incidence of violent and/or drug-related crime in some or all of the PHA's developments  ☐ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments  ☐ Residents fearful for their safety and/or the safety of their children  ☐ Observed lower-level crime, vandalism and/or graffiti  ☐ People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime  ☐ Other (describe below)
	2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).  Safety and security survey of residents  Analysis of crime statistics over time for crimes committed "in and around" public housing authority  Analysis of cost trends over time for repair of vandalism and removal of graffiti  Resident reports  PHA employee reports  Police reports  Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs  Other (describe below)
	3. Which developments are most affected? (list below)  **All Developments*
	Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA cal year  1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)  Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities  Crime Prevention Through Environmental Design  Activities targeted to at-risk youth, adults, or seniors  Volunteer Resident Patrol/Block Watchers Program  Other (describe below)
	2. Which developments are most affected? (list below)  **All Developments*
C.	Coordination between PHA and the police  1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)  Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan  Police provide crime data to housing authority staff for analysis and action  Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)  Police regularly testify in and otherwise support eviction cases  Police regularly meet with the PHA management and residents  Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services  Other activities (list below)
	2. Which developments are most affected? (list below)  **All Developments*
	Additional information as required by PHDEP/PHDEP Plan
PHA	As eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.  NOT APPLICABLE  Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?  Yes No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?  Yes No: This PHDEP Plan is an Attachment. (Attachment Filename:)
0	RESERVED FOR PET POLICY

<u>9. RESERVED FOR PET POLICY</u>

[24 CFR Part 903.7 9 (n)]

Attachment "C"

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#### **6B - 10.** Civil Rights Certifications [24 CFR Part 903.7 9 (o)] Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations. 6B-11. Fiscal Audit [24 CFR Part 903.7 9 (p)] 1. $\boxtimes$ Yes $\square$ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))? (If no, skip to component 17.) 2. X Yes No: Was the most recent fiscal audit submitted to HUD? Yes No: Were there any findings as the result of that audit? Yes No: If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain? 5. Yes No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)? **6B - 12. PHA Asset Management** [24 CFR Part 903.7 9 (q)] Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have not been addressed elsewhere in this PHA Plan? What types of asset management activities will the PHA undertake? (select all that apply) Not applicable Private management Development-based accounting Comprehensive stock assessment Other: (list below) 3. Yes No: Has the PHA included descriptions of asset management activities in the optional Public Housing Asset Management Table? 6B – 13. VIOLENCE AGAINST WOMEN ACT (VAWA) The St. Martinville Housing Authority, as administrator of a federal funded housing program – shall protect victims of criminal, domestic violence, sexual assault, or stalking, as well as members of the victims' family – from losing their HUD assisted housing as a result of the aforementioned crime committed against them. The agency's Administrative Plan covers denial of admission to the program and termination of continued participation relative to the Violence Against Women Act and serves as protection of such abuse. 7.0 -A. HOPE VI OR MIXED FINANCE, MODERNIZATION OR DEVELOPMENT Applicability of sub-component 7A: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement. Yes No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant) 1. Development name: 2. Development (project) number: 3. Status of grant: (select the statement that best describes the current status) Revitalization Plan under development Revitalization Plan submitted, pending approval Revitalization Plan approved Activities pursuant to an approved Revitalization Plan underway Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development

## Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:

name/s below:

Yes No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

#### 7.0 – B - DEMOLITION/ DISPOSITION

[24 CFR	Part 903.7	9 (	(h)]	

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)

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	Demolition/Disposition Activity Description
	1a. Development name:
	1b. Development (project) number:
	2. Activity type: Demolition Disposition Disposition
	3. Application status (select one)
	Approved
	Submitted, pending approval
	Planned application
	Date application approved, submitted, or planned for submission:     Number of units affected:
	6. Coverage of action (select one)
	Part of the development
	☐ Total development
	7. Timeline for activity:
	a. Actual or projected start date of activity:
	b. Projected end date of activity:
	NVERSION OF PUBLIC HOUSING TO TENANT BASED
	Component 10; Section 8 only PHAs are not required to complete this section.
	nts of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996
IIII) ∆nı	ronriotions Act
Yes [	under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description
. Yes [	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description
. Yes [	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the <b>optional</b> Pub Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.
. Yes [	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the <b>optional</b> Pub Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description
. Yes . Activity Yes	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.  Conversion of Public Housing Activity Description
. Activity Yes 1  1a. 1b.	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the <b>optional</b> Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.  Conversion of Public Housing Activity Description  Development name:  Development (project) number:
. Activity Yes   1a. 1b.	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description deliberation.  Conversion of Public Housing Activity Description  Development name:  Development (project) number:  What is the status of the required assessment?
. Activity Yes   1a. 1b.	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the <b>optional</b> Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.  Conversion of Public Housing Activity Description  Development name:  Development (project) number:
. Activity Yes   1a. 1b.	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description in the Optional Public Housing Activity Description  Development name:  Development (project) number:  What is the status of the required assessment?  Assessment underway
. Activity Yes   1a. 1b.	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the <b>optional</b> Put Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Descritable below.  Conversion of Public Housing Activity Description  Development name:  Development (project) number:  What is the status of the required assessment?  Assessment underway  Assessment results submitted to HUD
. Activity Yes   1a. 1b.	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Pub Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Descritable below.  Conversion of Public Housing Activity Description  Development name:  Development (project) number:  What is the status of the required assessment?  Assessment underway  Assessment results submitted to HUD  Assessment results approved by HUD (if marked, proceed to next question)  Other (explain below)
. Activity Yes   1a. 1b. 2. 3.	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.  Conversion of Public Housing Activity Description  Development name:  Development (project) number:  What is the status of the required assessment?  Assessment results submitted to HUD  Assessment results approved by HUD (if marked, proceed to next question)  Other (explain below)  Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
. Activity Yes   1a. 1b. 2. 3.	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Pub Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Descritable below.  Conversion of Public Housing Activity Description  Development name:  Development (project) number:  What is the status of the required assessment?  Assessment underway  Assessment results submitted to HUD  Assessment results approved by HUD (if marked, proceed to next question)  Other (explain below)
. Activity Yes   1a. 1b. 2. 3.	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Pub Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.  Conversion of Public Housing Activity Description  Development name:  Development (project) number:  What is the status of the required assessment?  Assessment underway  Assessment results submitted to HUD  Assessment results approved by HUD (if marked, proceed to next question)  Other (explain below)  Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)  Is of Conversion Plan (select the statement that best describes the current status)
. Activity Yes   1a. 1b. 2. 1	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Pub Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description of Public Housing Activity Description  Development name:  Development (project) number:  What is the status of the required assessment?  Assessment results submitted to HUD  Assessment results approved by HUD (if marked, proceed to next question)  Other (explain below)  Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)  as of Conversion Plan (select the statement that best describes the current status)  Conversion Plan in development  Conversion Plan submitted to HUD on: (DD/MM/YYYY)  Conversion Plan approved by HUD on: (DD/MM/YYYY)
. Activity Yes   1a. 1b. 2. 3. 4. Statu	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Put Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description Development name:  Development (project) number:  What is the status of the required assessment?  Assessment underway  Assessment results submitted to HUD  Assessment results approved by HUD (if marked, proceed to next question)  Other (explain below)  Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)  as of Conversion Plan (select the statement that best describes the current status)  Conversion Plan approved by HUD on: (DD/MM/YYYY)  Conversion Plan approved by HUD on: (DD/MM/YYYY)  Activities pursuant to HUD-approved Conversion Plan underway
. Activity Yes [ ]  1a. 1b. 2. [ ]  3. [ ]  4. State	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Pub Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description Development name:  Development (project) number:  What is the status of the required assessment?  Assessment underway  Assessment results submitted to HUD  Assessment results approved by HUD (if marked, proceed to next question)  Other (explain below)  Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)  as of Conversion Plan (select the statement that best describes the current status)  Conversion Plan in development  Conversion Plan approved by HUD on: (DD/MM/YYYY)  Activities pursuant to HUD-approved Conversion Plan underway  Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)
. Activity Yes [ ]  1a. 1b. 2. [ ]  3. [ ]  4. State	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Pub Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description below.  Conversion of Public Housing Activity Description  Development name: Development (project) number:  What is the status of the required assessment?  Assessment results submitted to HUD  Assessment results submitted to HUD (if marked, proceed to next question)  Other (explain below)  Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)  as of Conversion Plan (select the statement that best describes the current status)  Conversion Plan in development  Conversion Plan approved by HUD on: (DD/MM/YYYY)  Activities pursuant to HUD-approved Conversion Plan underway  Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)  Units addressed in a pending or approved demolition application (date submitted or approved:
. Activity Yes [ ]  1a. 1b. 2. [ ]  3. [ ]  4. State	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Pub Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Descritable below.  Conversion of Public Housing Activity Description  Development name: Development (project) number:  What is the status of the required assessment?  Assessment underway  Assessment results submitted to HUD  Assessment results approved by HUD (if marked, proceed to next question)  Other (explain below)  Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)  so of Conversion Plan is delect the statement that best describes the current status)  Conversion Plan submitted to HUD on: (DD/MM/YYYY)  Conversion Plan approved by HUD on: (DD/MM/YYYY)  Activities pursuant to HUD-approved Conversion Plan underway  Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)  Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:  Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:
. Activity Yes [ ]  1a. 1b. 2. [ ]  3. [ ]  4. State	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Put Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Descritable below.  Conversion of Public Housing Activity Description  Development name:  Development (project) number:  What is the status of the required assessment?  Assessment results submitted to HUD  Assessment results approved by HUD (if marked, proceed to next question)  Other (explain below)  Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)  as of Conversion Plan (select the statement that best describes the current status)  Conversion Plan in development  Conversion Plan approved by HUD on: (DD/MM/YYYY)  Conversion Plan approved by HUD on: (DD/MM/YYYY)  Activities pursuant to HUD-approved Conversion Plan underway  Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)  Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:  Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:  Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:  Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:
. Activity Yes [ ]  1a. 1b. 2. [ ]  3. [ ]  4. State	No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes complete one activity description for each identified development, unless eligible to complete a streamline submission. PHAs completing streamlined submissions may skip to component 11.)  Description  No: Has the PHA provided all required activity description information for this component in the optional Pub Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Descritable below.  Conversion of Public Housing Activity Description  Development name: Development (project) number:  What is the status of the required assessment?  Assessment underway  Assessment results submitted to HUD  Assessment results approved by HUD (if marked, proceed to next question)  Other (explain below)  Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)  so of Conversion Plan is delect the statement that best describes the current status)  Conversion Plan submitted to HUD on: (DD/MM/YYYY)  Conversion Plan approved by HUD on: (DD/MM/YYYY)  Activities pursuant to HUD-approved Conversion Plan underway  Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)  Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:  Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:

C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937

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# $\frac{\textbf{7.0-D-HOMEOWNERSHIP PROGRAMS ADMINISTERED BY THE PHA}}{[24~\text{CFR Part }903.7~9~(k)]}$

	ъ.		**	
Α.	Pub	lic	Hou	ısing

	rom Component 11A: Section 8 only PHAs are not required to complete 11A.  Yes No: Does the PHA administer any homeownership programs administered by the PHA under an approved section.	
	5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligibl to complete a streamlined submission due to <b>small PHA</b> or <b>high performing PHA</b> status. PHAs completing streamlined submissions may skip to component 11B.)	
	vity Description  S No: Has the PHA provided all required activity description information for this component in the <b>optional</b> Pul Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.)	olic
	Public Housing Homeownership Activity Description (Complete one for each development affected)	
	1a. Development name:	
	1b. Development (project) number:	
	2. Federal Program authority:  HOPE I	
	5(h)	
	Turnkey III  Section 22 of the USHA of 1027 (offective 10/1/00)	
	Section 32 of the USHA of 1937 (effective 10/1/99)  3. Application status: (select one)	
	Approved; included in the PHA's Homeownership Plan/Program	
	Submitted, pending approval	
	Planned application  4. Date Homeownership Plan/Program approved, submitted, or planned for submission:	
	(DD/MM/YYYY)	
	5. Number of units affected:	
	6. Coverage of action: (select one)	
	Part of the development  Total development	
	No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to component 12; if "yes", descril each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. High performing P may skip to component 12.)	
a. Size o	gram Description: of Program	
☐ Yes ☐	No: Will the PHA limit the number of families participating in the section 8 homeownership option?	
	If the answer to the question above was yes, which statement best describes the number of participants? (see	elect
	one) 25 or fewer participants	
	26 - 50 participants	
	51 to 100 participants more than 100 participants	
L DIIA		
	A-established eligibility criteria  Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria below:	

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#### 7.0-E - PROJECT BASED VOUCHERS

#### **8.0 Capital Improvement Needs**

[24 CFR Part 903.12 (c), 903.7 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Capital Fund Program	
1. X Yes No	Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete

items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.

2. Yes No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital

improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that

separate HUD approval is required for such financing activities).

#### 9.0 Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

#### A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
					Family Type	Overall	Affordability
Income <= 30% of AMI	1001	5	5	4	3	3	3
Income >30% but <=50% of AMI	548	5	5	4	3	3	3
Income >50% but <80% of AMI	524	5	5	4	3	3	3
Elderly	466	5	5	4	3	3	3
Families with Disabilities	591	5	5	4	3	3	3
White	830	5	5	4	3	3	3
Black	1210	5	5	4	3	3	3
Hispanic	32	5	5	4	3	3	3
Race/Ethnicity	0	0	0	0	0	0	0

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

Consolidated Plan of the Jurisdic	tion/s Indicate year:
U.S. Census data: the Comprehen	nsive Housing Affordability Strategy ("CHAS") dataset
American Housing Survey data	Indicate year:

Other housing market study

Other housing market study

Indicate year:

Other sources: (list and indicate year of information) 2000 Census Data

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#### B. Housing Needs of Families on the Public Housing Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List								
Public Housing Sit	ased assistance 8 and Public Housing e-Based or sub-jurisd	lictional waiting list (option	onal)					
If used, identify v	which development/su # of families	bjurisdiction:  % of total families	Annual Turnover					
	# Of Tallilles	% of total families	Annual Turnover					
Waiting list total	55							
Extremely low income <=30% AMI	43	<b>79%</b>						
Very low income (>30% but <=50% AMI)	9	16%						
Low income (>50% but <80% AMI)	3	5%						
Families with children	42	76%						
Elderly families	3	5%						
Families with Disabilities	4	7%						
White	9	16%						
Black	46	84%						
Hispanic	0	0						
Race/ethnicity	0	0						
Characteristics by Bedroom Size (Public Housing Only)								
1BR	13	24%						
2 BR	21	38%						
3 BR	20	36%						
4 BR	1	2%						
5 BR	0	0%						
5+ BR	0	0%						
Does the PHA ex	CLOSED (# OF MONT spect to reopen the listermit specific categori	Yes  THS)? Waiting list current in the PHA Plan year?  tes of families onto the wa	☐ No ☐ Yes					

#### 9.1 Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

#### (1) Strategies

Need: Shortage of affordable housing for all eligible populations

The PHA has a large number of people on the waiting list. The area is in great need of housing for all income levels that is affordable, decent and safe, especially for the very low income and low income.

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	. Maximize the number of affordable units available to the PHA within its current resources by:
Select all that	
	mploy effective maintenance and management policies to minimize the number of public housing units off-line
⊠ Re	educe turnover time for vacated public housing units
⊠ R€	educe time to renovate public housing units
☐ Se	eek replacement of public housing units lost to the inventory through mixed finance development
	sek replacement of public housing units lost to the inventory through section 8 replacement housing resources
	aintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the
	·
	risdiction
	ndertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
	aintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority
an	d poverty concentration
$\square$ M	aintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of
	ogram
	articipate in the Consolidated Plan development process to ensure coordination with broader community strategies
	ther (list below)
	ther (list below)
Strategy 2:	: Increase the number of affordable housing units by:
Select all that	
	pply for additional section 8 units should they become available
☐ Le	everage affordable housing resources in the community through the creation of mixed - finance housing
	ursue housing resources other than public housing or Section 8 tenant-based assistance.
_	ther: (list below)
	ther. (his below)
Need: Spe	ecific Family Types: Families at or below 30% of median
	: Target available assistance to families at or below 30 % of AMI
Select all that	
	sceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
	sceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
	mploy admissions preferences aimed at families with economic hardships
	dopt rent policies to support and encourage work
∐ Ot	ther: (list below)
	M. T. N. T. T. N.
	ecific Family Types: Families at or below 50% of median
	: Target available assistance to families at or below 50% of AMI
Select all that	
	mploy admissions preferences aimed at families who are working
Ao	dopt rent policies to support and encourage work
☐ O <sub>1</sub>	ther: (list below)
_	
Need: Spe	ecific Family Types: The Elderly
Strategy 1:	: Target available assistance to the elderly:
Select all that	
	eek designation of public housing for the elderly
	pply for special-purpose vouchers targeted to the elderly, should they become available
	ther: (list below)
	ther: (list below)
Nood: Sno	ecific Family Types: Families with Disabilities
	: Target available assistance to Families with Disabilities:
Scrategy 1: Select all that	
	eek designation of public housing for families with disabilities
	arry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
	pply for special-purpose vouchers targeted to families with disabilities, should they become available
☐ Ai	ffirmatively market to local non-profit agencies that assist families with disabilities
	ther: (list below)
	·
Nood- C	seific Family Types. Deess on othnicities with dispusa outlinests besselve weeds
	ecific Family Types: Races or ethnicities with disproportionate housing needs
	: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:
Select if appli	
	ffirmatively market to races/ethnicities shown to have disproportionate housing needs
01	ther: (list below)

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Need: Specific Family Types: Races or ethnicities with disproportionate housing needs Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:
elect if applicable  Affirmatively market to races/ethnicities shown to have disproportionate housing needs  Other: (list below)
Strategy 2: Conduct activities to affirmatively further fair housing
celect all that apply  Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units  Market the section 8 program to owners outside of areas of poverty /minority concentrations  Other: (list below)
Other Housing Needs & Strategies: (list needs and strategies below)  2) Reasons for Selecting Strategies  Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:  Funding constraints  Staffing constraints
Limited availability of sites for assisted housing  Extent to which particular housing needs are met by other organizations in the community  Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA  Influence of the housing market on PHA programs  Community priorities regarding housing assistance
Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board Results of consultation with advocacy groups Other: (list below)
10 –A. Provide a statement of the Progress the PHA has made in meeting the mission and goals described in
he last 5 Year Plan. The St. Martinville Housing Authority continues to work on the goals described in the 2005 PHA Plan by updating and rehabbing units and keeping the units, safe and sanitary.
10 -B. Criteria for Substantial Deviations and Significant Amendments
1) Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

#### a. Substantial Deviation from the 5-Year Plan

- Any change to Mission Statement such as:
- 50% deletion from or addition to the goals and objectives as a whole.
- 50% or more decrease in the quantifiable measurement of any individual goal or objective

#### b. Significant Amendment or Modification to the Annual Plan

- 50% variance in the funds projected in the Capital Fund Program Annual Statement
- Any increase or decrease over 50% in the funds projected in the Financial Resource Statement and/or the Capital Fund Program Annual Statement
- Any change in a policy or procedure that requires a regulatory 30-day posting
- Any submission to HUD that requires a separate notification to residents, such as HOPE VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership Programs
- Any change inconsistent with the local, approved Consolidated Plan

#### D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

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Part I: S	Summary						
PHA Nai		Grant Type and Number				FFY Grant:	2010
St. M	lartinville Housing	Capital Fund Program Grant No:	LA48P040501-10			FFY of Grant	Approval:
	Authority	Replacement Housing Factor Grant No:					
	·	Date of CFFP:					
Type of C	Grant					•	
✓ Origin	al Annual Statement	Reserve for Disaster/Emergencies	Re	vised Annual S	Statement (revision no:	)	
Perfor	mance and Evaluation Re	port for Period Ending:	Fin	al Performanc	e and Evaluation Report		
Line	Summary by Developm	ment Account		Total E	Estimated Cost	Total Ac	tual Costs 2
			(	riginal	Revised 2	Obligated	Expended
1	Total non-CFP Funds	3					
2	1406 Operations (may	y not exceed 20% of line 21) 3	\$12	2,000.00			
3	1408 Management Ir	nprovements	\$2	,000.00			
4	1410 Administration	(may not exceed 10% of line 21)					
5	1411 Audit						
6	1415 Liquidated Dar						
7	1430 Fees and Costs		\$2.	1,000.00			
8	1440 Site Acquisition						
9	1450 Site Improvement		\$40	0,000.00			
10	1460 Dwelling Struc		\$90	0,052.00			
11	<u> </u>	uipment - Nonexpendable					
12	1470 Non-dwelling S						
13	1475 Non-dwelling I	Equipment					
14	1485 Demolition						
15	1492 Moving to Wor						
16	1495.1 Relocation C						
17	1499 Development A						
18a		on or Debt Service paid by the PHA					
18ba		n or Debt Service paid Via System of Direct Pays	ment				
19		nay not exceed 8% of line 20)					
20		rant:: (sum of lines 2-19)	\$16	5,052.00	\$0.00	\$0.00	\$0.00
21		elated to LBP Activities					
22		elated to Section 504 Activities					
23		elated to Security - Soft Costs					
24		elated to Security - Hard Costs					
25	Amount of line 20 Re	elated to Energy Conservation Measures			1		

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<sup>&</sup>lt;sup>1</sup>To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

<sup>3</sup>PHAs with under 250 units in management may use 100% of CFP Grants for Operations

<sup>&</sup>lt;sup>4</sup>RHF funds shall be included here

Expires 4/30/2011 Endowel EEV of Counts 2010

Part II: Supporting Pa	iges								Expires 4/30/2
PHA Name:		Grant Type and Number					Federal FFY	of Grant:	2010
St. Martinville Hous	ing Authority	Capital Fund Program Grant No:	LA48P040501-1	! <b>0</b>					
		CFFP (Yes / No):							
		Replacement Housing Factor Grant	No:						
<b>Development Number</b>	General	Description of Major Work	Development	Quantity					
Name / PHA-Wide	Categories		Account No.		<b>Total Estimated Costs</b>		Total A	ctual Costs	Status of Work
Activities									
					Original	Revised 1	Funds Obligated 2	Funds Expended 2	
PHA Wide	Operations		1406		\$12,000.00				
PHA Wide	Security Surveill	ance Equipment	1408		\$2,000.00				
PHA Wide	A/E Fees & Cost	ts	1430		\$15,000.00				
PHA Wide	Coordinator		1430		\$6,000.00				
PHA Wide	Replace sidewal regulations	ks to comply with accessibility	1450		\$10,000.00				
PHA Wide	Replace exisiting needed	g fence & install new fencing where	1450		\$30,000.00				
LA040-003	Add extra insula	tion in attics	1460	14-24 Units	\$20,000.00		1		
PHA Wide	Replacing roofing		1460	12 Bldgs.	\$70,052.00	†			
						1			
						1			
					4444	4	40.00	40.00	
					\$165,052.00	\$0.00	<b>\$0.00</b>	\$0.00	

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Development Number Name / PHA -Wide Activities  PHA Wide LA040-003	All Fund (Quarter En Original Obligation End Date 9/30/2012 9/30/2012	All Funds I (Quarter En  Original Expenditure End Date  9/30/2014	Reasons for Revised Target Dates 1
PHA Wide	Obligation End Date 9/30/2012	End Date	
		9/30/2014	
		9/30/2014	

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end date can only be revised with HUD approval pursuant to Section 9j of the U. S. Housing Act of 1937, as amended.

Par	t I: Summary									
PHA	A Name/Number St. Marti	nville Housing Authority	Locality	(City/Couty & State	e)	St. Martin Parish	Oı	riginal 5-Year Plan		Revision No:
	Development Number and	Work Statement	Work S	tatement for Year 2	Work	Statement for Year 3	Work	Statement for Year 4	Work	Statement for Year 5
A.	Name	for Year 1 FFY 2010	FFY	2011	FFY	2012	FFY	2013	FFY	2014
		2010								
В.	Physical Improvements Subtotal									
C.	Management Improvements		\$	2,000.00	\$	2,000.00	\$	10,000.00	\$	-
D.	PHA-Wide Non-dwelling Structure and Equipment		\$	100,052.00	\$	55,000.00	\$	96,581.00	\$	85,000.00
E.	Administration	///////////////////////////////////////								
F.	Other		\$	51,000.00	\$	96,052.00	\$	46,471.00	\$	68,052.00
G.	Operations		\$	12,000.00	\$	12,000.00	\$	12,000.00	\$	12,000.00
Н.	Demolition		7							
I.	Development	///////////////////////////////////////	7							
J.	Capital Fund Financing - Debt Service									
K.	Total CFP Funds	///////////////////////////////////////	<b>\$</b>	165,052.00	<b>\$</b>	165,052.00	\$	165,052.00	<b>\$</b>	165,052.00
L.	Total Non-CFP Funds									
M.	Grand Total									

Part II: Suppo	orting Pages - Management Needs	Work Staten	nent(s)					
Work	Work Statement for Year	201	1	Work Statement for Year 2012				
Statement for	FFY <u>20</u>	<u>11</u>		FFY 2				
Year 1 FFY 2010	Development Number/Name General Descripsion of Major Work Categories	Quantity	Estimated Costs	Development Number/Name General Descripsion of Major Work Categories	Quantity	Estimated Costs		
///////0	perations		\$ 12,000.00	Operations Operations		\$ 12,000.00		
11111111	ecurity Surveillance Equipment			Security Surveillance Equipment		\$ 2,000.00		
	/E Fees & Costs			A/E Fees & Costs		\$ 12,000.00		
///////C	Coordinator		\$ 6,000.00	Coordinator		\$ 6,000.00		
				Computer Hardware/Software		\$ 5,000.00		
//////								
HHHA								
//////\								
<del>//////</del>								
//////								
//////	014.74		φ 25,000,00	01/.10		φ 27.000.00		
<u>//////</u>	Subtotal of 1	Estimated Cost	\$ 35,000.00	Subtotal of	Estimated Cost	\$ 37,000.00		

Expires 4/30/2011 Part II: Supporting Pages - Physical Needs Work Statement(s) Work Statement for Year Work Statement for Year Work 2011 2012 Statement for FFY **2011** FFY 2012 Development Development Year 1 FFY Number/Name Number/Name Quantity **Estimated Costs** Quantity **Estimated Costs** General Descripsion of 2010 General Descripsion of Major Work Categories Major Work Categories Replace existing windows & screens 20 Units 44,000.00 Remodel kitchen to install dryer space & 20 Units 50,000.00 Replace shower base, wall surrounds and 20,471.00 Replace sidewalks 15,000.00 6 Add extra insulation in attic 10 Bldgs 10,000.00 Install new fencing 500 ft. 30,000.00 2 Bldgs. Add parking spaces 10,000.00 10,000.00 Replace roofing Refinish bathtubs 10 Units 5,581.00 Purchase Ranges & Refrigerators 8,000.00 10 each Replace doors & hardware on storage & water heater buildings 10,000.00 Remove trees & stumps & do landscaping 5.000.00 12 Replace existing fencing & install new fencing where needed 30.000.00 Install Cable TV Jacks & Phone Jacks 20 Units 5,000.00 Pressure wash exterior 26 Bldgs 5.052.00 **Subtotal of Estimated Cost** \$ 130,052.00 **Subtotal of Estimated Cost** \$ 128,052.00

Work	Work Statement for Year	20	13	Work Statement for Year	20	14	
Statement for	FFY 2	<u>013</u>		FFY	2014		_
Year 1 FFY 2010	Development Number/Name General Descripsion of Major Work Categories	Quantity	Estimated Costs	Development Number/Name General Descripsion of Major Work Categories	Quantity	Estimated Costs	
///////////////////////////////////////	perations		\$ 12,000,00	Operations Operations		\$	12,000.00
	ecurity Surveillance Equipment			A/E Fees & Costs		\$	12,000.00
	E Fees & Costs					\$	6,000.00
	oordinator		\$ 5,471.00				
		Estimated Cost	\$ 39,471.00		stimated Cost		30,000.00

Part II: Supp	porting Pages - Physical Needs Work	Statemen	nt(s)		Г	1168 4/30	-		
Work	Work Statement for Year	20	13	Work Statement for Year 2014					
Statement for	FFY <u>2013</u>			FFY <u>2014</u>					
Year 1 FFY 2010	Development Number/Name General Descripsion of Major Work Categories	Quantity	Estimated Costs	Development Number/Name General Descripsion of Major Work Categories	Quantity	Estimated Costs			
	Install New Water Heaters	24	\$ 8,000.00	Install new flooring	4 units	\$	8,000.00		
	New Maintenance Truck	1	\$ 20,000.00	Remodel kitchen to install dryer space & replace cabinets	10 Units	\$	77,000.00		
	New Lawn Mower	1	\$ 9,000.00	Upgrade exterior main electrical service & wiring and change out old utility poles		\$	10,000.00		
	Replace Countertops	10 Units		· · · · · · · · · · · · · · · · · · ·		\$	40,052.00		
HHHH	Replace Carpet in main office building Replace bathtubs and surrounds	10 Units	\$ 5,000.00 \$ 63,581.00						
		10 0 mis	φ 03,301.00						
	Subtotal of Esting	mated Cost	\$ 125,581.00	Subtotal of Esti	mated Cost	\$	135,052.00		

## Required Attachment A: Community Service Requirement

In order to be eligible for continued occupancy, each adult family member must either (1) contribute to eight hours community service per month (not including political activities) within the community in which the public housing development is located or (2) participate in an economic self-sufficiency program unless they are exempt from this requirement. The following adult members are exempt from this requirement: Family members who are 62 or older, family members who are blind or disabled, family members who are primary caregiver for someone who is blind or disabled, family members engaged in work activity, family members who are exempt from work activity under Part A title IV of the Social Security Act or under any other state welfare program, including the welfare to work program, family members receiving assistance under a state program funded under Part A title IV of the Social Security Act or under any other state welfare program, including welfare to work and who are in compliance with that program.

## Performance and Evaluation Report for 2004, 2005, 2006, 2007, 2008, 2009 Capital Fund Program and 2009 ARRA Stimulus Grant

Part I: S	ummary					
PHA Nar	ne:	Grant Type and Number			FFY Grant:	2004
St. M	artinville Housing	Capital Fund Program Grant No:	148P040501-04		FFY of Grant Ap	proval:
	Authority	Replacement Housing Factor Grant No:				
		Date of CFFP:				
Type of (	Frant				•	
	al Annual Statement	Reserve for Disaster/Emergencies	✓ Revised Annual S	tatement (revision no: 1	)	
	mance and Evaluation Rep			and Evaluation Report		
Line	Summary by Developm	nent Account	Total Es	stimated Cost	Total Actu	ıal Costs 2
			Original	Revised 1	Obligated	Expended
1	Total non-CFP Funds					_
2	1406 Operations (may	y not exceed 20% of line 21) 3	\$36,400.00	\$12,000.00	\$12,000.00	\$12,000.00
3	1408 Management In	nprovements	\$1,999.00	\$1,666.02	\$1,666.02	\$1,666.02
4	1410 Administration	(may not exceed 10% of line 21)	\$5,501.00	\$0.00	\$0.00	\$0.00
5	1411 Audit					
6	1415 Liquidated Dan	nages				
7	1430 Fees and Costs		\$15,860.00	\$12,449.00	\$12,449.00	\$12,449.00
8	1440 Site Acquisition	a .				
9	1450 Site Improveme	ent	\$2,000.00	\$18,340.00	\$18,340.00	\$18,340.00
10	1460 Dwelling Struct	tures	\$100,710.00	<i>\$132,467.98</i>	\$132,467.98	\$132,467.98
11	1465.1 Dwelling Equ	nipment - Nonexpendable	\$20,000.00	\$2,897.00	\$2,897.00	\$2,897.00
12	1470 Non-dwelling S	tructures	\$0.00	\$2,650.00	\$2,650.00	\$2,650.00
13	1475 Non-dwelling E	Equipment				
14	1485 Demolition					
15	1492 Moving to Wor	k Demonstration				
16	1495.1 Relocation Co	osts				
17	1499 Development A	activities 4				
18a	1501 Collateralization	n or Debt Service paid by the PHA				
18ba	9000 Collateralization	n or Debt Service paid Via System of Direct Paym	ent			
19	1502 Contingency (m	nay not exceed 8% of line 20)				
20	Amount of Annual Gr	cant:: (sum of lines 2-19)	\$182,470.00	\$182,470.00	\$182,470.00	\$182,470.00
21	Amount of line 20 Re	lated to LBP Activities				
22	Amount of line 20 Re	elated to Section 504 Activities				
23	Amount of line 20 Re	elated to Security - Soft Costs				
24	Amount of line 20 Re	lated to Security - Hard Costs				
25	Amount of line 20 Re	lated to Energy Conservation Measures				

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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report

 $<sup>^{2}</sup>$  To be completed for the Performance and Evaluation Report or a Revised Annual Statement

<sup>&</sup>lt;sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here

Part II: Supporting Page	ges						-	
PHA Name:	Grant Type and Number					Federal FFY of Gi	ant:	2004
St. Martinville Housin	g Authority Capital Fund Program Grant No:	LA48P040501-0	14					
	CFFP (Yes / No):							
	Replacement Housing Factor Gra	ant No:						
<b>Development Number</b>	General Description of Major Work	Development	Quantity					
Name / PHA-Wide	Categories	Account No.		Total Esti	mated Costs	Total Ac	tual Costs	Status of Work
Activities								
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
PHA Wide	Operations	1406		\$36,400.00	\$12,000.00	\$12,000.00	\$12,000.00	Complete
PHA Wide	Section 3 Worker	1408		\$1,999.00	\$1,666.02	\$1,666.02	\$1,666.02	Complete
PHA Wide	Security Patrol	1410		\$5,501.00	\$0.00	\$0.00	\$0.00	Complete
PHA Wide	A/E Fees & Costs	1430		\$15,860.00	\$12,449.00	\$12,449.00	\$12,449.00	Complete
LA040-1, 2, 3	Remove Tree Stumps	1450		\$2,000.00	\$18,340.00	\$18,340.00	\$18,340.00	Complete
LA040-002	Add condencing coils to units	1460		\$30,543.63	\$10,631.25	\$10,631.25	\$10,631.25	Complete
LA040-003	Install cabinets	1460		\$65,626.00	\$71,934.26	\$71,934.26	\$71,934.26	Complete
LA040-003	Install GFI's	1460	68 Units	\$3,060.00	\$5,662.47	\$5,662.47	\$5,662.47	Complete
LA040-1, 2, 3	Repaint exterior doors	1460		\$1,480.37	\$27,600.00	\$27,600.00	\$27,600.00	Complete
LA040-001, 002	Install security lighting	1460		\$0.00	\$16,640.00	\$16,640.00	\$16,640.00	Complete
LA040-003	Replace Ranges & Refrigerators	1465.1		\$20,000.00	\$2,897.00	\$2,897.00	\$2,897.00	Complete
PHA Wide	Replace office A/C	1470		\$0.00	\$2,650.00	\$2,650.00	\$2,650.00	Complete
				\$182,470.00	\$182,470.00	\$182,470.00	\$182,470.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

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<sup>2</sup> To be completed for the Performance and Evaluation Report

art III: Implementation Schedule for Captial Fund Financing Program								
A Name: St. Martinvill	le Housing Authority				Federal FFY of Grant: 2004			
Development Number Name / PHA -Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds (Quarter Er		Reasons for Revised Target Dates			
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date				
PHA Wide	9/30/2006		9/30/2008					
LA040-001	9/30/2006		9/30/2008					
LA040-002	9/30/2006		9/30/2008					
LA040-003	9/30/2006		9/30/2008					
					+			

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<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end date can only be revised with HUD approval pursuant to Section 9J of the U. S. Housing Act of 1937, as amended

Part I: S	ummary					
PHA Nar	ne:	Grant Type and Number			FFY Grant:	2005
St. M	artinville Housing	Capital Fund Program Grant No: LA48P0405	01-05		FFY of Grant A	pproval:
	Authority	Replacement Housing Factor Grant No:				
		Date of CFFP:				
Type of (	Grant					
	al Annual Statement	Reserve for Disaster/Emergencies	Revised Annual Sta	tement (revision no:	)	
	mance and Evaluation Rep	port for Period Ending: 9/30/2009	Final Performance	and Evaluation Report		
Line	Summary by Developm	nent Account	Total Es	timated Cost	Total Act	ual Costs 2
			Original	Revised 1	Obligated	Expended
1	Total non-CFP Funds					_
2	1406 Operations (may	not exceed 20% of line 21) 3	\$12,048.00		\$12,048.00	\$12,048.00
3	1408 Management Im	nprovements	\$2,000.00		\$2,000.00	\$2,000.00
4	1410 Administration (	(may not exceed 10% of line 21)	\$2,500.00		\$2,500.00	\$2,500.00
5	1411 Audit					
6	1415 Liquidated Dam	nages				
7	1430 Fees and Costs		\$20,474.00		\$20,474.00	\$20,474.00
8	1440 Site Acquisition					
9	1450 Site Improveme	ent	\$43,483.00		\$43,483.00	\$43,483.00
10	1460 Dwelling Struct	ures	\$91,000.00		\$91,000.00	\$91,000.00
11	1465.1 Dwelling Equi	ipment - Nonexpendable				
12	1470 Non-dwelling St	tructures				
13	1475 Non-dwelling E	quipment				
14	1485 Demolition					
15	1492 Moving to Worl	k Demonstration				
16	1495.1 Relocation Co	osts				
17	1499 Development A					
18a	1501 Collateralization	n or Debt Service paid by the PHA				
18ba	9000 Collateralization	or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (ma	•				
20	Amount of Annual Gra	ant:: (sum of lines 2-19)	\$171,505.00	\$0.00	\$171,505.00	\$171,505.00
21	Amount of line 20 Rel	ated to LBP Activities				
22	Amount of line 20 Rel	ated to Section 504 Activities				
23	Amount of line 20 Rel	ated to Security - Soft Costs				
24	Amount of line 20 Rel	ated to Security - Hard Costs				
25	Amount of line 20 Rel	ated to Energy Conservation Measures				

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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report

 $<sup>^{2}\,</sup>$  To be completed for the Performance and Evaluation Report or a Revised Annual Statement

 $<sup>^3\,</sup>$  PHAs with under 250 units in management may use 100% of CFP Grants for Operations

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here

Part II: Supporting Pa	0								
PHA Name:	Grant Type a	nd Number					Federal FFY	of Grant:	2005
St. Martinville Housin	ng Authority Capital Fund Pr	ogram Grant No:	LA48P040501-0	5					
	CFFP (Yes / N	No):							
	Replacement l	Housing Factor Gr	ant No:						
<b>Development Number</b>	General Description of	Major Work	Development	Quantity					
Name / PHA-Wide	Categories		Account No.		<b>Total Estimated Costs</b>		Total Actual Costs		Status of Work
Activities					 				
							Funds	Funds	
					Original	Revised 1	Obligated 2	Expended 2	
PHA Wide	Operations		1406		\$12,048.00		\$12,048.00	\$12,048.00	Complete
PHA Wide	Section 3 Worker		1408		\$2,000.00		\$2,000.00	\$2,000.00	Complete
PHA Wide	Security Patrol		1410		\$2,500.00		\$2,500.00	\$2,500.00	Complete
PHA Wide	A/E Fees & Costs		1430		\$15,000.00		\$15,000.00	\$15,000.00	Complete
PHA Wide	Coordinator		1430		\$5,474.00		\$5,474.00	\$5,474.00	Complete
LA040-001	Resurface parking lots		1450	4	\$30,000.00		\$30,000.00	\$30,000.00	Complete
LA040-ALL	Remove trees and stumps		1450		\$3,297.00		\$3,297.00	\$3,297.00	Complete
LA040-ALL	Repair existing fences		1450		\$3,151.00		\$3,151.00	\$3,151.00	Complete
LA040-003	Install new fencing		1450	500 Ft.	\$7,035.00		\$7,035.00	\$7,035.00	Complete
LA040-002	Add condensing units		1460	30 Units	\$48,000.00		\$48,000.00	\$48,000.00	Complete
LA040-003	Install kitchen cabinets		1460	8 Units	\$16,000.00		\$16,000.00	\$16,000.00	Complete
	Paint exterior doors, water h	eater doors and							
LA040-ALL	attic vents	center doors and	1460		\$18,000.00		\$18,000.00	\$18,000.00	Complete
LA040-001, 002	Pressure wash all buildings		1460		\$9,000.00		\$9,000.00	\$9,000.00	Complete
21070 001, 002	2. Casallo masir all a millings		1700		<i>\$7,000.00</i>		ψ>,σσσ.σσ	\$2,000.00	Complete
					\$171,505.00	\$0.00	\$171,505.00	\$171,505.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

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<sup>2</sup> To be completed for the Performance and Evaluation Report

chedule for Captial Fun	d Financing Program			Expires 4/30/2011
le Housing Authority	9 9			Federal FFY of Grant: 2005
All Fund Obligated (Quarter Ending Date)				Reasons for Revised Target Dates
Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
9/30/2007		9/30/2009		
9/30/2007		9/30/2009		
9/30/2007		9/30/2009		
9/30/2007		9/30/2009		
	All Fund (Quarter E  Original Obligation End Date 9/30/2007 9/30/2007	All Fund Obligated (Quarter Ending Date)  Original Actual Obligation Obligation End End Date  9/30/2007 9/30/2007 9/30/2007	All Fund Obligated (Quarter Ending Date)  Original Actual Obligation Original Expenditure Obligation End End Date  Date  9/30/2007 9/30/2009 9/30/2007 9/30/2009 9/30/2007 9/30/2009	All Fund Obligated (Quarter Ending Date)  Original Actual Obligation Original Expenditure Obligation End End Date  Date  9/30/2007 9/30/2009 9/30/2007 9/30/2009 9/30/2007 9/30/2009 9/30/2009

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Obligation and expenditure end date can only be revised with HUD approval pursuant to Section 9J of the U.S. Housing Act of 1937, as amended

Part I: S	Summary					
PHA Nai	me:	Grant Type and Number			FFY Grant:	2006
St. M	lartinville Housing	Capital Fund Program Grant No:	LA48P040501-06		FFY of Grant	Approval:
	Authority	Replacement Housing Factor Grant No:				
		Date of CFFP:				
Type of (	Grant					
	al Annual Statement	Reserve for Disaster/Emergencies	Revised Annual St	tatement (revision no:	)	
✓ Perfor	mance and Evaluation Re	port for Period Ending: 9/30/2009	Final Performance	and Evaluation Report		
Line	Summary by Developn	nent Account	Total Es	stimated Cost	Total Act	ual Costs 2
			Original	Revised 1	Obligated	Expended
1	Total non-CFP Funds	1				
2	1406 Operations (may	y not exceed 20% of line 21) 3	\$12,048.00		\$12,048.00	\$12,048.00
3	1408 Management In	nprovements	\$2,000.00		\$2,000.00	\$0.00
4	1410 Administration	(may not exceed 10% of line 21)				
5	1411 Audit					
6	1415 Liquidated Dan	mages				
7	1430 Fees and Costs		\$17,145.00		\$17,145.00	\$13,350.83
8	1440 Site Acquisition					
9	1450 Site Improveme		\$13,539.16		\$13,539.16	\$13,375.00
10	1460 Dwelling Struc		\$108,772.84		\$108,772.84	\$108,772.84
11		nipment - Nonexpendable	\$7,307.00		\$7,307.00	\$5,416.00
12	1470 Non-dwelling S		\$13,606.00		\$13,606.00	\$0.00
13	1475 Non-dwelling H	Equipment				
14	1485 Demolition					
15	1492 Moving to Wor					
16	1495.1 Relocation Co					
17	1499 Development A					
18a		on or Debt Service paid by the PHA				
18ba		n or Debt Service paid Via System of Direct Pay	ment			
19		nay not exceed 8% of line 20)				
20	Amount of Annual Gr		\$174,418.00	\$0.00	\$174,418.00	\$152,962.67
21		elated to LBP Activities				
22		elated to Section 504 Activities				
23		elated to Security - Soft Costs				
24		elated to Security - Hard Costs				
25	I Amount of line 20 Re	lated to Energy Conservation Measures				

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 $<sup>^{\,1}</sup>$  To be completed for the Performance and Evaluation Report

 $<sup>^{2}\,</sup>$  To be completed for the Performance and Evaluation Report or a Revised Annual Statement

<sup>&</sup>lt;sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here

Part II: Supporting Pa	nges							
PHA Name:	Grant Type and Number					Federal FFY	of Grant:	2006
St. Martinville Housi	ng Authority Capital Fund Program Grant No:	LA48P040501-0	6					
	CFFP (Yes / No):							
	Replacement Housing Factor C	Grant No:						
<b>Development Number</b>	General Description of Major Work	Development	Quantity					
Name / PHA-Wide	Categories	Account No.		Total Estim	ated Costs	Total Ac	ctual Costs	Status of Work
Activities								
						Funds	Funds	
				Original	Revised 1	Obligated 2	Expended 2	
PHA Wide	Operations	1406		\$12,048.00		\$12,048.00	\$12,048.00	Complete
PHA Wide	Section 3 Worker	1408		\$2,000.00		\$2,000.00	\$0.00	In Process
PHA Wide	A/E Fees & Costs	1430		\$12,000.00		\$12,000.00	\$12,000.00	Complete
PHA Wide	Coordinator	1430		\$5,145.00		\$5,145.00	\$1,350.83	In Process
LA040-002	Resurface Parking lot	1450		\$10,000.00		\$10,000.00	\$10,000.00	Complete
LA040-002	Add a new parking space	1450		\$3,539.16		\$3,539.16	\$3,375.00	In Process
LA040-002	Add condensing coils and units	1460	30 Units	\$55,000.00		\$55,000.00	\$55,000.00	Complete
LA040-003	Install dryer space	1460	115 Units	\$18,772.84		\$18,772.84	\$18,772.84	Complete
PHA Wide	Replace roofing	1460	15 Bldgs	\$35,000.00		\$35,000.00	\$35,000.00	Complete
PHA Wide	Purchase Ranges	1465.1	22	\$3,653.50		\$3,653.50	\$3,653.50	Complete
PHA Wide	Purchase Refrigerators	1465.1	22	\$3,653.50		\$3,653.50	\$1,762.50	In Process
LA040-001, 002, 003	Replace doors on storage buildings & water heater buildings	1470	24	\$13,606.00		\$13,606.00	\$0.00	In Process
				\$174,418.00	\$0.00	\$174,418.00	\$152,962.67	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

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<sup>2</sup> To be completed for the Performance and Evaluation Report

Part III: Implementation So	chedule for Captial Fun	d Financing Program			2.19.20 1100.2011
	lle Housing Authority				Federal FFY of Grant: 2006
Development Number Name / PHA -Wide	All Fund Obligated (Quarter Ending Date)		All Funds (Quarter Er		Reasons for Revised Target Dates 1
Activities					
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide	9/30/2008		9/30/2010		
LA040-002	9/30/2008		9/30/2010		
LA040-003	9/30/2008		9/30/2010		

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<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end date can only be revised with HUD approval pursuant to Section 9J of the U. S. Housing Act of 1937, as amended

Part I: S	ummary					
PHA Nar	ne:	Grant Type and Number			FFY Grant:	2007
St. M	artinville Housing	Capital Fund Program Grant No: LA48P040	501-07		FFY of Grant Ap	oproval:
	Authority	Replacement Housing Factor Grant No:				
		Date of CFFP:				
Type of (	Grant					
Origin	al Annual Statement	Reserve for Disaster/Emergencies	Revised Annual Sta	atement (revision no:	)	
✓ Perfor	mance and Evaluation Re	eport for Period Ending: 9/30/2009	Final Performance	and Evaluation Report		
Line	Summary by Developr	ment Account	Total Est	timated Cost	Total Actu	al Costs 2
			Original	Revised 1	Obligated	Expended
1	Total non-CFP Funds	S				
2	1406 Operations (may	y not exceed 20% of line 21) 3	\$12,000.00		\$12,000.00	\$0.00
3	1408 Management In	*	\$4,000.00		\$4,000.00	\$0.00
4	1410 Administration	(may not exceed 10% of line 21)				
5	1411 Audit					
6	1415 Liquidated Dar					
7	1430 Fees and Costs		\$17,145.00		\$17,145.00	\$0.00
8	1440 Site Acquisition					
9	1450 Site Improvement		\$12,652.00		\$12,652.00	\$0.00
10	1460 Dwelling Struc		\$117,674.00		\$117,674.00	\$0.00
11		uipment - Nonexpendable	\$6,000.00		\$6,000.00	\$0.00
12	1470 Non-dwelling S					
13	1475 Non-dwelling I	Equipment				
14	1485 Demolition					
15	1492 Moving to Wor					
16	1495.1 Relocation C					
17	1499 Development A					
18a		on or Debt Service paid by the PHA				
18ba		n or Debt Service paid Via System of Direct Payment				
19		nay not exceed 8% of line 20)	44.50.474.00	40.00	44.0 474.00	40.00
20		rant:: (sum of lines 2-19)	\$169,471.00	\$0.00	\$169,471.00	\$0.00
21		elated to LBP Activities				
22		elated to Section 504 Activities				
23		elated to Security - Soft Costs				
24		elated to Security - Hard Costs				
25	IAmount of line 20 Re	elated to Energy Conservation Measures				

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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

 $<sup>^3</sup>$  PHAs with under 250 units in management may use 100% of CFP Grants for Operations

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here

Part II: Supporting Pa	ages							
PHA Name:	Grant Type and Number					Federal FFY	of Grant:	2007
St. Martinville Housin	ng Authority Capital Fund Program Grant No:	LA48P040501-0	) <i>7</i>					
	CFFP (Yes / No):							
	Replacement Housing Factor Gr	ant No:						
<b>Development Number</b>	General Description of Major Work	Development	Quantity					
Name / PHA-Wide	Categories	Account No.		Total Estima	ated Costs	Total A	ctual Costs	Status of Work
Activities								
						Funds	Funds	
				Original	Revised 1	Obligated 2	Expended 2	
PHA Wide	Operations	1406		\$12,000.00		\$12,000.00	\$0.00	In Process
PHA Wide	Security	1408		\$2,000.00		\$2,000.00	\$0.00	In Process
PHA Wide	Section 3 Worker	1408		\$2,000.00		\$2,000.00	\$0.00	In Process
PHA Wide	A/E Fees & Costs	1430		\$12,000.00		\$12,000.00	\$0.00	In Process
PHA Wide	Coordinator	1430		\$5,145.00		\$5,145.00	\$0.00	In Process
LA040-001	Resurface parking lots	1450	2	\$6,419.00		\$6,419.00	\$0.00	In Process
LA040-001, 002, 003	Remove trees & stumps and do landscaping	1450		\$6,233.00		\$6,233.00	\$0.00	In Process
LA040-003	Install central heating & cooling system	1460		\$117,674.00		\$117,674.00	\$0.00	In Process
LA040-001, 002, 003	Replace shower base, wall closures, doors & tubs as needed	1465.1		\$3,000.00		\$3,000.00	\$0.00	In Process
LA040-001, 002, 003	Purchase Ranges & Refrigerators	1465.1	3 of each	\$3,000.00		\$3,000.00	\$0.00	In Process
				<i>\$169,471.00</i>	<i>\$0.00</i>	<i>\$169,471.00</i>	\$0.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

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<sup>2</sup> To be completed for the Performance and Evaluation Report

Part III: Implementation So	chedule for Captial Fun	d Financing Program			Expires 4/30/2011
	le Housing Authority	2 3			Federal FFY of Grant: 2007
Development Number Name / PHA -Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds (Quarter Er	Expended nding Date)	Reasons for Revised Target Dates 1
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide	9/30/2009		9/30/2011		
LA040-001	9/30/2009		9/30/2011		
LA040-002	9/30/2009		9/30/2011		
LA040-003	9/30/2009		9/30/2011		
				<u> </u>	

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end date can only be revised with HUD approval pursuant to Section 9J of the U. S. Housing Act of 1937, as amended

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Part I: S	ummary					
PHA Nar	ne:	Grant Type and Number			FFY Grant:	2008
St. M	artinville Housing	Capital Fund Program Grant No:	48P040501-08		FFY of Grant A	pproval:
	Authority	Replacement Housing Factor Grant No:				
		Date of CFFP:				
Type of (	Grant				•	
	al Annual Statement	Reserve for Disaster/Emergencies	✓ Revised Annual S	Statement (revision no: 1	)	
	mance and Evaluation Rep	port for Period Ending: 9/30/2009	Final Performance	e and Evaluation Report		
Line	Summary by Developm	nent Account	Total I	Estimated Cost	Total Actu	ual Costs 2
			Original	Revised 1	Obligated	Expended
1	Total non-CFP Funds					·
2	1406 Operations (may	not exceed 20% of line 21) 3	\$12,000.00	\$12,000.00	\$12,000.00	\$0.00
3	1408 Management Im	nprovements	\$5,667.00	\$5,667.00	\$5,667.00	\$0.00
4	1410 Administration (	(may not exceed 10% of line 21)				
5	1411 Audit					
6	1415 Liquidated Dam	nages				
7	1430 Fees and Costs		\$17,145.00	\$17,145.00	\$17,145.00	\$0.00
8	1440 Site Acquisition	ı	\$13,659.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improveme	ent	\$130,399.00	\$13,659.00	\$13,659.00	\$0.00
10	1460 Dwelling Struct	tures		\$130,399.00	\$36,889.00	\$0.00
11	1465.1 Dwelling Equi	ipment - Nonexpendable				
12	1470 Non-dwelling St	tructures				
13	1475 Non-dwelling E	quipment				
14	1485 Demolition					
15	1492 Moving to World					
16	1495.1 Relocation Co					
17	1499 Development A					
18a		n or Debt Service paid by the PHA				
18ba		or Debt Service paid Via System of Direct Payme	ent			
19		ay not exceed 8% of line 20)				
20	Amount of Annual Gra	ant:: (sum of lines 2-19)	\$178,870.00	\$178,870.00	\$85,360.00	\$0.00
21		lated to LBP Activities				
22		lated to Section 504 Activities				
23		lated to Security - Soft Costs				
24		lated to Security - Hard Costs				
25	Amount of line 20 Rel	lated to Energy Conservation Measures				

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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report

 $<sup>^{2}</sup>$  To be completed for the Performance and Evaluation Report or a Revised Annual Statement

 $<sup>^3</sup>$  PHAs with under 250 units in management may use 100% of CFP Grants for Operations

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here

Part II: Supporting Pa	iges							
PHA Name:	Grant Type and Number					Federal FFY	of Grant:	2008
St. Martinville Housin	<b>ag Authority</b> Capital Fund Program Grant No:	LA48P040501-0	8					
	CFFP (Yes / No):							
	Replacement Housing Factor 6	Grant No:						
<b>Development Number</b>	General Description of Major Work	Development	Quantity					
Name / PHA-Wide	Categories	Account No.		Total Estin	nated Costs	Total Ac	Status of Work	
Activities								
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
PHA Wide	<b>Operations</b>	1406		\$12,000.00	\$12,000.00	\$12,000.00	\$0.00	In Process
PHA Wide	Computer hardware/software	1408		\$3,667.00	\$3,667.00	\$3,667.00	\$0.00	In Process
PHA Wide	Section 3 Worker	1408		\$2,000.00	\$2,000.00	\$2,000.00	\$0.00	In Process
PHA Wide	A/E Fees & Costs	1430		\$12,000.00	\$12,000.00	\$12,000.00	\$0.00	In Process
PHA Wide	Coordinator	1430		\$5,145.00	\$5,145.00	\$5,145.00	\$0.00	In Process
PHA Wide	Site Acquistion	1440		\$13,659.00	\$0.00	\$0.00	\$0.00	N/A
LA040-001, 002, 003	Repair sidewalk	1450		\$30,399.00	\$5,000.00	\$5,000.00	\$0.00	In Process
LA040-001, 002	Upgrade exterior main service & wiring	1450		\$100,000.00	\$8,659.00	\$8,659.00	\$0.00	In Process
LA040-003	Install centrail heat/cooling	1460	16 Units	\$0.00	\$82,000.00	\$9,444.50	\$0.00	In Process
LA040-001, 002	Replace roofing	1460	8 Bldgs	\$0.00	\$30,399.00	\$9,444.50	\$0.00	In Process
LA040-003	Install porch lighting	1460		\$0.00	\$5,000.00	\$5,000.00	\$0.00	In Process
LA040-002	Correct foundation failure	1460		\$0.00	\$5,000.00	\$5,000.00	\$0.00	In Process
LA040-001, 002	Install attic insulation	1460		\$0.00	\$8,000.00	\$8,000.00	\$0.00	In Process
				\$178,870.00	\$178,870.00	\$85,360.00	\$0.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

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<sup>2</sup> To be completed for the Performance and Evaluation Report

Part III: Implementation S	chedule for Captial Fur	nd Financing Program			Enpires ((2012)
	lle Housing Authority				Federal FFY of Grant: 2008
Development Number Name / PHA -Wide	All Fund Obligated (Quarter Ending Date)		All Funds (Quarter En		Reasons for Revised Target Dates
Activities		_		_	
	Original	Actual Obligation	Original Expenditure	Actual Expenditure	
	Obligation End Date	End Date	End Date	End Date	
PHA Wide	6/12/2010		6/12/2012		
LA040-001	6/12/2010		6/12/2012		
LA040-002	6/12/2010		6/12/2012		
LA040-003	6/12/2010		6/12/2012		

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end date can only be revised with HUD approval pursuant to Section 9J of the U. S. Housing Act of 1937, as amended

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Part I: S	ummary						
PHA Nar	ne:	Grant Type and Number				FFY Grant:	2009
St. M	artinville Housing	Capital Fund Program Grant No:	A48P040501-0	9		FFY of Grant A	pproval:
	Authority	Replacement Housing Factor Grant No:					
		Date of CFFP:					
Type of C	Frant					•	
	al Annual Statement	Reserve for Disaster/Emergencies		Revised Annual S	Statement (revision no:	)	
✓ Perfor	mance and Evaluation Rep	ort for Period Ending: 9/30/2009		Final Performance	e and Evaluation Report		
Line	Summary by Developm	ent Account		Total E	stimated Cost	Total Actu	al Costs 2
				Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may	not exceed 20% of line 21) 3		\$12,000.00			
3	1408 Management Im	provements		\$2,000.00			
4	1410 Administration (	may not exceed 10% of line 21)					
5	1411 Audit						
6	1415 Liquidated Dam	ages					
7	1430 Fees and Costs			\$17,145.00			
8	1440 Site Acquisition						
9	1450 Site Improvement			\$21,000.00			
10	1460 Dwelling Structi			\$109,907.00			
11		pment - Nonexpendable					
12	1470 Non-dwelling St						
13	1475 Non-dwelling Ed	quipment		\$3,000.00			
14	1485 Demolition						
15	1492 Moving to Worl						
16	1495.1 Relocation Co						
17	1499 Development Ac						
18a		or Debt Service paid by the PHA					
18ba		or Debt Service paid Via System of Direct Paym	nent				
19	1502 Contingency (ma						
20	Amount of Annual Gra			\$165,052.00	\$0.00	<i>\$0.00</i>	\$0.00
21	Amount of line 20 Rela						
22		ated to Section 504 Activities					
23		ated to Security - Soft Costs					
24		ated to Security - Hard Costs					
25	Amount of line 20 Rela	ated to Energy Conservation Measures					
Signature of	f Executive Director	Date	S	Signature of Public Hou	sing Manager		Date

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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

 $<sup>^3</sup>$  PHAs with under 250 units in management may use 100% of CFP Grants for Operations

<sup>4</sup> RHF funds shall be included here

Part II: Supporting Pa	nges								
PHA Name:		Grant Type and Number					Federal FFY	of Grant:	2009
St. Martinville Housin	ng Authority	Capital Fund Program Grant No:	LA48P040501-0	<b>19</b>					
		CFFP (Yes / No):							
		Replacement Housing Factor Gra	nt No:						
<b>Development Number</b>	General	Description of Major Work	Development	Quantity					
Name / PHA-Wide		Categories	Account No.		Total Estim	ated Costs	Total A	ctual Costs	Status of Work
Activities									
					Original	Revised 1	Funds Obligated 2	Funds Expended 2	
PHA Wide	Operations		1406		\$12,000.00				
PHA Wide	Security Patro	ol	1408		\$2,000.00				
PHA Wide	A/E Fees & Co	osts	1430		\$12,000.00				
PHA Wide	MOD Coordin	nator	1430		\$5,145.00				
PHA Wide	Property Iden	tification Sign	1450		\$3,000.00				
LA040-002, 003	Upgrade exter wires	rior main electrical service &	1450		\$7,000.00				
PHA Wide	Replace sidew regulations	alks to comply with accessibility	1450		\$11,000.00				
LA040-003	Install new flo	oring	1460	4 Units	\$7,326.00				
LA040-002, 003		l attic insulation	1460	12 Bldgs	\$18,000.00				
LA040-003	dryer vents	natural gas supply lines and	1460	10 Units	\$5,000.00				
PHA Wide	Replace all mo	ail boxes	1460		\$6,000.00				
LA040-003	Replace roofin	ıg	1460		\$73,581.00				
LA040-002, 003	Office Furnitu	re for security building	1475		\$3,000.00				
					\$165,052.00	\$0.00	\$0.00	\$0.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

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<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report

Part III: Implementation So	chedule for Captial Fun	d Financing Program			Exp105 1/30/2011
	le Housing Authority				Federal FFY of Grant: 2009
Development Number Name / PHA -Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds (Quarter Er		Reasons for Revised Target Dates 1
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide	9/30/2011		9/30/2013		
LA040-002	9/30/2011		9/30/2013		
LA040-003	9/30/2011		9/30/2013		
			_		

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end date can only be revised with HUD approval pursuant to Section 9J of the U. S. Housing Act of 1937, as amended

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Part I: S	ummary					
PHA Nar	ne:	Grant Type and Number			FFY Grant:	2009-S
St. M	artinville Housing	Capital Fund Program Grant No:	8S040501-09		FFY of Grant A	Approval:
	Authority	Replacement Housing Factor Grant No:				
		Date of CFFP:				
Type of (	Grant					
Origina	al Annual Statement	Reserve for Disaster/Emergencies	Revised Annual S	Statement (revision no:	)	
✓ Perfor	mance and Evaluation Rep	port for Period Ending: 9/30/2009	☐ Final Performance	e and Evaluation Report		
Line	Summary by Developm	nent Account	Total Es	stimated Cost	Total Act	ual Costs 2
			Original	Revised 1	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may	not exceed 20% of line 21) 3				
3	1408 Management In	nprovements				
4	1410 Administration	(may not exceed 10% of line 21)				
5	1411 Audit					
6	1415 Liquidated Dan	nages				
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improveme					
10	1460 Dwelling Struct		\$226,414.00		\$226,414.00	\$0.00
11	· · ·	ipment - Nonexpendable				
12	1470 Non-dwelling S					
13	1475 Non-dwelling E	Equipment				
14	1485 Demolition					
15	1492 Moving to Wor					
16	1495.1 Relocation Co					
17	1499 Development A					
18a		n or Debt Service paid by the PHA				
18ba		or Debt Service paid Via System of Direct Paymer	nt			
19		ay not exceed 8% of line 20)	#22 C 47 4 0 0	40.00	000 < 47 4 00	40.00
20	Amount of Annual Gr		\$226,414.00	\$0.00	\$226,414.00	\$0.00
21		lated to LBP Activities				
22		lated to Section 504 Activities				
23		lated to Security - Soft Costs				
24		lated to Security - Hard Costs				
1 7	LAMOUNT OF line 20 Rel	lated to Energy Conservation Measures			1	1

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 $<sup>^{\,1}\,</sup>$  To be completed for the Performance and Evaluation Report

 $<sup>^{2}</sup>$  To be completed for the Performance and Evaluation Report or a Revised Annual Statement

<sup>&</sup>lt;sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here

Part II: Supporting Pa	ages								
PHA Name:		Grant Type and Number					Federal FFY	of Grant:	2009-S
St. Martinville Housin	ng Authority	Capital Fund Program Grant No:	LA48S040501-0	9					
		CFFP (Yes / No):							
		Replacement Housing Factor Gr	ant No:						
<b>Development Number</b>	General	_		Quantity					
Name / PHA-Wide		Categories	Account No.		Total Estimated Costs		Total Ac	ctual Costs	Status of Work
Activities									
					0.1.1	Revised 1	Funds	Funds	
					Original	Keviseu 1	Obligated 2	Expended 2	
LA040-001	Install central	air & heat in units as needed	1460		\$226,414.00		\$226,414.00	\$0.00	In Process
							ļ		
							<u> </u>		
							<u> </u>		
					\$226,414.00	\$0.00	\$226,414.00	\$0.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

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<sup>2</sup> To be completed for the Performance and Evaluation Report

Part III: Implementation S	chedule for Captial Fur	nd Financing Program			Expires 1/30/2011
	le Housing Authority				Federal FFY of Grant: 2009-S
Development Number Name / PHA -Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
LA040-001	3/17/2010		3/17/2011		

<sup>1</sup> Obligation and expenditure end date can only be revised with HUD approval pursuant to Section 9J of the U. S. Housing Act of 1937, as amended

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# PHA Certification of Compliance with PHA Plans and Related Regulations

### **U. S. Department of Housing and Urban Development**Office of Public and Indian Housing

Expires 4/30/2011

## PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the *Streamlined Annual PHA Plan*

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the  $\underline{X}$  5-Year and/or\_\_\_ Annual PHA Plan for the PHA fiscal year beginning  $\underline{4/2010}$ , hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

- 1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
- 2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
- 3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
- 4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
- 5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
- 6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
- 7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
- 8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
- 9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
- 10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
- 11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
- 12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
- 13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).

Previous version is obsolete Form **HUD-50077** (4/2008)

- 14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
- 15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
- 16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
- 17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
- 18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
- 19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
- 20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
- 21. The PHA provides assurance as part of this certification that:
  - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
  - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
  - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
- 22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

St. Martinville Housing Authority PHA Name			LA040 PHA Number				
X	5- Year PHA Plan for Fiscal Years	20	10		20		
	Annual PHA Plan for Fiscal Years	20			20		
prosecut	I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. <b>Warning:</b> HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)						
Name	of Authorized Official  Byron Fournet					itle	
Signat	ure					Chairman Pate (mm/dd/yyyy)	
	Jyn m					12/29/2009	

Previous version is obsolete Form **HUD-50077** (4/2008)

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## Certification for a Drug-Free Workplace

## U. S. Department of Housing and Urban Development

Applicant Name

#### St. Martinville Housing Authority

Program/Activity Receiving Federal Grant Funding

#### 2010 Capital Fund Program

Acting on behalf of the above named Applicant as its Authorized official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

- a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession. Or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.
- b. Establishing an on-going drug-free awareness program to inform employees --
  - (1) The dangers of drug abuse in the workplace;
- (2) The Applicant's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.
- c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;
- d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

- (1) Abide by the terms of the statement; and
- (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statue occurring in the workplace no later than five calendar days after such conviction:
- e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d. (2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d. (2), with respect to any employee who is convicted ---
- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
- (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

	s) the site (s) for the marformance of words done in connection
2. Sites for Work Performance. The Applicant shall list (on separate page with the HUD funding of the program/activity shown above: Place of Perfor zip code. Identify each sheet with the Applicant name and address and the program.	mance shall include the street address, city, county, State and
Check here if there are workplaces on file that are not identified on the attached	sheets.
I hereby certify that all the information stated herein, as well as any information provided in the <b>Warning:</b> HUD will prosecute false claims and statements. Conviction may result in criminal and	*
Name of Authorized Official	Title
Larry F. Pratt Signature	Executive Director
Lane Horat	Date (mm/dd/yyyy)

#### **Certification of Payments** to Influence Federal Transactions

U. S. Department of Housing and Urban Development Office of Public and Indian Housing

Applicant Name

St. Martinville Housing Authority

Program/Activity Receiving Federal Grant Funding

#### 2010 Capital Fund Program

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No federal appropriated funds have been paid or will be paid, by or on behalf of the, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal Contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000.00 and not more than \$100,000.00 for each such failure.

I hereby certify that all the information stated herein, as well as any infor Warning: HUD will prosecute false claims and statements. Convict (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	mation provided in the accompaniment herewith, is true and accurate, ion may result in criminal and/or civil penalties.
Name of Authorized Official	Title
Larry F. Pratt Signature	Executive Director
Signature	Date (mm/dd/yyyy)
Jany HE rate	12/29/2009

Certification by State or Local Official of PHA Plans Consistency With the Consolidated Plan

#### U. S. Department of Housing and Urban Development

Office of Public and Indian Housing Expires 4/30/2011

## Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

Ι, _	Thomas Nelson	<u>n</u> the	Mayor	certify that the Five Year
	Name		Mayor or State Representative	
and Annual PHA Plan of the		St. Martinville Housing Authority		
			Name of Housing Authority	
is consistent with the Consolidated Plan of the state of			Louisiana	prepared pursuant to 24 CFR
			State Name	
Part	91.			

Gened & Dated by Appropriate State or Local Official

#### **Civil Rights Certification**

**U. S. Department of Housing and Urban Development**Office of Public and Indian Housing

Expires 04/30/2011

### **Civil Rights Certification Annual Certification and Board Resolution**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof.

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

St. Martinville Housing Authority  PHA Name	DIIA Nymbar/IIA Codo		
THA Name	PHA Number/HA Code		
I hereby certify that all the information stated herein, as well as an	information provided in the accompaniment herewith, is true and accurate. Warning:		
HUD will prosecute false claims and statements. Conviction may (3802)	y information provided in the accompaniment herewith, is true and accurate. Warning: result in criminal and/or civil penalties. (18 U. S. C. 1001, 1010, 1012; 31 U. S. C. 3729		
<u> </u>			
Name of Authorized Official	Title		
Name of Authorized Official  Byron Fournet ignature	Title Chairman		

#### DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse for public burden disclosure.)

a. contract b. grant c. cooperative agreement d. loan e. loan guarantee	A b. init	al Action: /offer/application tial award st-award	3. Report Type:  a. initial filing b. material change For Material Change Only: year quarter date of last report	
f. loan insurance  4. Name and Address of Reporting En  X Prime Substitute  Tier	atity: awardee , if known:	Name and Addre		
6. Federal Department/Agency:  U. S. Department of Housing and Urb	an Development	7. Federal Program Name/Description:  2010 Capital Fund Program  CFDA Number, if applicable:		
8. Federal Action Number, if known:  10. a. Name and Address of Lobbying (if individual, last name, first name)	0	\$		
11. Information requested through this form is authorized section 1352. This disclosure of lobbying activities is representation of fact upon which reliance was place when this transaction was made or entered into. This pursuant to 31 U.S.C 1352. This information will be Congress semi-annually and will be available for put person who fails to file the required disclosure shall penalty of not less than \$10,000 and not more than \$ failure.	is a material d by the tier above s disclosure is required reported to the olic inspection. Any be subject to a civil	Title:	Larry Pratt  Executive Director  337-394-1002 Date:	
Federal Use Only:			Authorized for Local Reproduction	

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